REST AVAILABLE CODY

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

1450. 1013

CLAIMS AS FILED - PART (Column 1)					(Column 2)			SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			(Column t)		(OoldWin 2)			RATE	FEE		RATE	FEE	١.
TOTAL CLAIMS			<u> </u>		AN MARCO SYSTEM			BASIC FEE	370.00		BASIC FEE	740.00	(
FOR			NUMBER FILED		NUMBER EXTRA			BASIC PEE	370.00	OR	BASIC FEE	740.00	(
TOTAL CHARGEABLE CLAIMS			minus 20=		* ~			X\$ 9=		OR	X\$18=	<u></u>	
INDEPENDENT CLAIMS			2 minus 3 =		* -			X42=		OR	X84=	-	\
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	-	(
* If the difference in column 1 is less than zero, enter "0" in co						olumn 2		TOTAL		OR	TOTAL	740	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							١	SMALL	ENTITY	OR	OTHER SMALL I		
4		(Column 1) CLAIMS REMAINING		HIGH NUM	IEST IBER	PRESENT	Ί	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
AMENDMENT		AFTER AMENDMENT			FOR	EXTRA	-		FEE			FEE/	ł
	Total	· 13	Minus	** (//)	=		X\$ 9=		OR	X\$18=	 / -	ł
	Independent	* (NTATION OF M	Minus	***	TCLAIM	-	-	X42=		OR	X84=		
	FIRST PRESE	NIATION OF M	OLITPLE DE	ENDEN	ODAIM		J	+140=		OR	+280=		
	1 1106							TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE]
	5/24/((Ćolumn 1)		(Coli	ımn 2)	(Column 3	3)	ADDIT. FEE		•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		1
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIG NUI PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI-/ TIONAL FEE	
	Total	· [c	Minus	** 0	10	e		X\$ 9=		OR	X\$18=		
	Independent	• 3	Minus	***	3	-		X42=		OR	X84=		1
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=		1
								TOTAL		OR	TOTAL		1
								ADDIT. FEE		. (ADDIT. FEE	: L	1
 		(Column 1) CLAIMS			ımn 2) HEST	(Column 3	3)		Linn	1		ADDI-	┨
AMENDMENT C		REMAINING AFTER AMENDMENT		NUI PREV	MBER VIOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIONAL	-
	Total .	*	Minus	**		=		X\$ 9=		OR	X\$18=		
NE SE	Independent	*	Minus	***] <u> </u>	_	X42=		OR	X84=		1
K	FIRST PRESENTATION OF MULTIPLE DEPENDENT COSTIN							+140=		OR			1
	If the entry in colu	ımn 1 is less than	the entry in col	umn 2, w	ite "0" in c	olumn 3.		TOTAL		OR	TOTAL		1
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ****If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												1	
	The "Highest Nut	mber Previously P	aid For (Total o	or Indeper	ndent) is th	e highest nun	nber f	ound in the a	ppropriate b	DX IN C	ownin 1.		١